

MILLS & ONELLO LLPATTORNEYS AT LAW
PATENTS TRADEMARKS AND COPYRIGHTSELEVEN BEACON STREET, SUITE 806
BOSTON, MASSACHUSETTS 02108TELEPHONE: (617) 894-4900
FACSIMILE: (617) 742-7774
E-MAIL: MAIL@MILLSONELLO.COMRECEIVED
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NOV 02 2004

FACSIMILE TRANSMISSION**TO:** United States Patent and Trademark Office **FROM:** Steven M. Mills
Examiner: Huisman, David J.
Group Art Unit: 2183**FAX NO:** (703) 872-9306 **DATE:** November 2, 2004**RE:** U.S. Patent Application
"Branch Prediction Method Using Address Trace," by Sung-Bae Park
U.S. Serial No.: 09/714,325
U.S. Filing Date: November 15, 2000
Samsung Reference: IB-9904-125
Your Reference: IB9118-US
Our Reference: SAM-0169**NUMBER OF PAGES INCLUDING COVER SHEET: 25**

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NOV 02 2004 PATENT

Attorney Docket No.: SAM-0169

Customer No.: 29344

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Sung-Bae Park

Examiner: Huisman, David J.

Serial No.: 09/714,325

Group Art Unit: 2183

Filing Date: November 15, 2000

Title: METHOD OF AN ADDRESS TRACE CACHE STORING LOOP CONTROL
INFORMATION TO CONSERVE TRACE CACHE AREACERTIFICATE OF FACSIMILE TRANSMISSION

I hereby certify that this paper and any attachments hereto are being forwarded to the United States Patent and Trademark Office via facsimile at the facsimile telephone number and on the date indicated below.

11/2/04

Date

(703) 672-9306

Facsimile Number



Chelsey Davis

Mail Stop AF
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

TRANSMITTAL LETTER

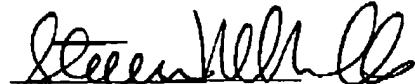
Sir:

Enclosed herewith for filing in the above-identified patent application please find the following listed items:

1. Amendment Transmittal; and
2. Second Amendment After Final Rejection in response to Office Action mailed on June 3, 2004 and the Advisory Action mailed on October 12, 2004.

In connection with the foregoing matter, please charge the \$430.00 fee believed to be due, or any additional fees which may be due, or credit any overpayment, to Deposit Account Number 50-1798. A duplicate copy of this letter is provided for this purpose.

Respectfully submitted,



Steven M. Mills

Registration Number 36,610

Attorney for Applicant

Date: 11/2/04
Mills & Onello LLP
Eleven Beacon Street, Suite 605
Boston, MA 02108
Telephone: (617) 994-4900
Facsimile: (617) 742-7774
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Serial No.: 09/714,325
Filing Date: November 15, 2000
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Examiner: Huisman, David J.
Group Art Unit: 2183CERTIFICATE OF FACSIMILE TRANSMISSION

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AMENDMENT TRANSMITTAL

Sir:

1. Transmitted herewith is an amendment for this application.

STATUS

2. Applicant is

a small entity. A verified statement:
 is attached.
 was already filed.

other than small entity.

EXTENSION OF TERM

3. The proceedings herein are for a patent application and the provisions of 37 CFR 1.136 apply.

(a) Applicant petitions for an extension of time under 37 CFR 1.136

Applicant(s): Sung-Bae Park
 Serial No.: 09/714,325

Extension (months)	Fee for other than <u>small entity</u>	Fee for <u>small entity</u>
<input type="checkbox"/> one month	\$110.00	\$55.00
<input checked="" type="checkbox"/> two months	\$430.00	\$215.00
<input type="checkbox"/> three months	\$980.00	\$490.00
<input type="checkbox"/> four months	\$1,530.00	\$765.00

Fee \$ 430.00

If an additional extension of time is required, please consider this a petition therefor.

An extension for ___ months has already been secured and the fee paid therefor of
 \$ ___ is deducted from the total fee due for the total months of extension now requested.

Extension fee due with this request \$ 430.00

OR

(b) Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.

FEE FOR CLAIMS

4. The fee for claims (37 CFR 1.16(b)-(d)) has been calculated as shown below:

CLAIMS AS AMENDED						
	(1) CLAIMS REMAINING AFTER AMENDMENT		(2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(3) PRESENT NUMBER EXTRA	RATE	FEE
TOTAL CLAIMS	1	minus	20	0	x \$18	\$0
INDEPENDENT CLAIMS	1	minus	3	0	x \$84	\$0
MULTIPLE DEPENDENT CLAIM ADDED	No				\$280	
					TOTAL	\$0
If applicant has small entity status under 37 CFR 1.9 and 1.27, then divide total fee by 2 and enter amount here.				SMALL ENTITY TOTAL		

Applicant(s): Sung-Bae Park
Serial No.: 09/714,325

(c) No additional fee for claims is required.

OR

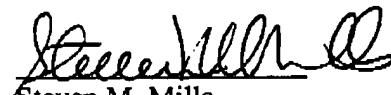
(d) Total additional fee for claims required \$ _____

FEER PAYMENT

5. Attached is a check in the sum of \$ _____
 Charge Deposit Account No. 50-1798 the sum of \$ 430.00.
A duplicate of this transmittal is attached.

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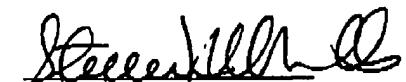
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